



Complete Summary

TITLE

Radiology: percentage of patients aged 40 years and older undergoing a screening mammogram whose information is entered into a reminder system with a target due date for the next mammogram.

SOURCE(S)

American College of Radiology, Physician Consortium for Performance Improvement®, National Committee for Quality Assurance. Radiology physician performance measurement set. Chicago (IL): American Medical Association, National Committee for Quality Assurance; 2009 Feb. 42 p.

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percentage of patients aged 40 years and older undergoing a screening mammogram whose information is entered into a reminder system with a target due date for the next mammogram.

RATIONALE

Although screening mammograms can reduce breast cancer mortality by 20-35% in women aged 40 years and older, recent evidence has suggested a decreasing trend in screening rates and a need for intervention. Moreover, many American women do not receive mammograms at recommended intervals, as illustrated by a multiyear study of mammography utilization in a large screening center at Massachusetts General Hospital. The study found that more than half of women

who received a mammogram in 1992 had fewer than five mammograms during the subsequent 10 years (the expected number if following a 2-year screening interval), and that only 6 percent received annual mammograms during the entire 10 years. The use of patient reminders is associated with an increase in screening mammography and is currently recommended based on the results of a systematic review of studies conducted by the Task Force on Community Preventive Services (TFCPS). Encouraging the implementation of a reminder system could therefore help to reverse the trend and lead to an increase in mammography.*

*The following clinical recommendation statements are quoted verbatim from the referenced clinical guidelines and represent the evidence base for the measure:

The U.S. Preventive Services Task Force (USPSTF) recommends screening mammography, with or without clinical breast examination (CBE), every 1-2 years for women aged 40 and older. (USPSTF)

Asymptomatic women 40 years of age or older should have an annual screening mammogram. (American College of Radiology [ACR])

The Task Force [on Community Preventive Services] recommends client reminders to increase breast cancer screening on the basis of **strong evidence** of effectiveness. (TFCPS)

PRIMARY CLINICAL COMPONENT

Screening mammography; patient reminder system

DENOMINATOR DESCRIPTION

All patients aged 40 years and older undergoing a screening mammogram

NUMERATOR DESCRIPTION

Patients whose information is entered into a reminder system with a target due date for the next mammogram (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Centers for Disease Control and Prevention (CDC). Use of mammograms among women aged > or = 40 years--United States, 2000-2005. MMWR Morb Mortal Wkly Rep 2007 Jan 26;56(3):49-51. [PubMed](#)

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Ambulatory Care
Ancillary Services
Hospitals
Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Individual Clinicians

TARGET POPULATION AGE

Age greater than or equal to 40 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

See the "Rationale" field.

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Staying Healthy

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All patients aged 40 years and older undergoing a screening mammogram

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

All patients aged 40 years and older undergoing a screening mammogram

Exclusions

None

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Diagnostic Evaluation
Encounter

DENOMINATOR TIME WINDOW

Time window is a single point in time

NUMERATOR INCLUSIONS/EXCLUSIONS**Inclusions**

Patients whose information is entered into a reminder system* with a target due date for the next mammogram

*The reminder system should be linked to a process for notifying patients when their next mammogram is due and should include the following elements at a minimum: patient identifier, patient contact information, date(s) of prior screening mammogram(s) (if known), and the target due date for the next mammogram.

Exclusions

None

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Encounter or point in time

DATA SOURCE

Administrative data
Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Measure #6: reminder system for mammograms.

MEASURE COLLECTION

[The Physician Consortium for Performance Improvement® Measurement Sets](#)

MEASURE SET NAME

[Radiology Physician Performance Measurement Set](#)

SUBMITTER

American Medical Association on behalf of the American College of Radiology, Physician Consortium for Performance Improvement®, and National Committee for Quality Assurance

DEVELOPER

American College of Radiology
National Committee for Quality Assurance
Physician Consortium for Performance Improvement®

FUNDING SOURCE(S)

Unspecified

COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

William Golden, MD (*Co-Chair*); David Seidenwurm, MD (*Co-Chair*); Stephen Amis, MD; Michael Bettmann, MD; Joseph P. Drozda, Jr, MD; James H. Ellis, MD; Thomas C. Fenter, MD; George Fueredi, MD; Bruce R. Greenspahn, MD, FACC; Carol H. Lee, MD; Richard Leithiser, Jr, MD, MMM; Mark D. Morasch, MD; Robert Pyatt, Jr., MD; Robert Rosenberg, MD; John Schneider, MD, PhD; Gary Schultz, DC, DACBR; Carl L. Tommaso, MD, FSCAI

American College of Radiology: Judy Burleson, MHSA; Mark Gorden, MS; Diane Hayek; Pamela Wilcox

American Medical Association: Joseph Gave, MPH; Kendra Hanley, MS, CHE; Karen Kmetik, PhD; Samantha Tierney, MPH

National Committee for Quality Assurance: Aisha Pittman, MPH; Phil Renner, MBA

Centers for Medicare & Medicaid Service: Sue Nedza, MD, MBA, FACEP; Sylvia Publ, MBA, RHIA

Consortium Consultants: Rebecca Kresowik; Timothy Kresowik, MD

FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

Conflicts, if any, are disclosed in accordance with the Physician Consortium for Performance Improvement® conflict of interest policy.

ENDORSER

National Quality Forum

INCLUDED IN

Ambulatory Care Quality Alliance

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2007 Oct

REVISION DATE

2009 Feb

MEASURE STATUS

This is the current release of the measure.

This measure updates a previous version: American College of Radiology, Physician Consortium for Performance Improvement®, National Committee for Quality Assurance. Radiology physician performance measurement set. Chicago (IL): American Medical Association, National Committee for Quality Assurance; 2007 Oct. 42 p.

SOURCE(S)

American College of Radiology, Physician Consortium for Performance Improvement®, National Committee for Quality Assurance. Radiology physician performance measurement set. Chicago (IL): American Medical Association, National Committee for Quality Assurance; 2009 Feb. 42 p.

MEASURE AVAILABILITY

The individual measure, "Measure #6: Reminder System for Mammograms," is published in the "Radiology Physician Performance Measurement Set." This document and technical specifications are available in Portable Document Format (PDF) from the American Medical Association (AMA)-convened Physician Consortium for Performance Improvement® Web site: www.physicianconsortium.org.

For further information, please contact AMA staff by e-mail at cqi@ama-assn.org.

NQMC STATUS

This NQMC summary was completed by ECRI Institute on February 1, 2008. The information was verified by the measure developer on April 10, 2008. This NQMC summary was updated by ECRI Institute on April 23, 2009. The information was verified by the measure developer on September 16, 2009.

COPYRIGHT STATEMENT

© 2007 American Medical Association and National Committee for Quality Assurance. All Rights Reserved.

CPT® Copyright 2006 American Medical Association

[Copyright/Permission Requests](#)

Date Modified: 11/23/2009

